CODE COMPLAINT FORM

• CONFIDENTIAL • NOT FOR PUBLIC REVIEW

Mail or deliver to:

Mono County Community Development Department Compliance Division PO Box 347 Mammoth Lakes, CA 93546

REQUEST FOR INVESTIGATION

(DO NOT ALLOW THE PUBLIC TO VIEW THIS DOCUMENT)

This form is to be utilized when a citizen is requesting that a county department investigate a possible violation of a county law or other health and safety related problem.

This form is confidential if submitted by a private citizen in accordance with county policy. However, the form must be released if required by a court of law. Forms submitted by competing business entities, as determined by the affected department head, will be made available to the complainant upon request. A competing business is a business that provides a similar service or manufactures or sells similar products.

Case Number

Dept. Year Number

COMPLAINANT INFORMATION (person completing this form)		
Name	 Name	
Mailing Address, City/State/Zip	Phone Nu	umber
Do you wish to be contacted with th	ne results of this investigation	? ☐ Yes ☐ No
If this complaint is being filed again business? ☐ Yes ☐ No ☐ Not Ap		ner or employee of a competing
I certify that the information provide	ed on this form is true and co	rrect to the best of my knowledge.
Signature		
Date		
DESCRI	PTION OF VIOLATION/	PROBLEM
Street Address of Violation	Community	Assessor Parcel Number
Property Owner (if known)		
Nature of violation or problem (plea	se be as specific as possible).	Use the back of this sheet, if needed.